



**COUNTY OF LOS ANGELES
DEPARTMENT OF AUDITOR-CONTROLLER**

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May 12, 2011

TO: Supervisor Michael D. Antonovich, Mayor
Supervisor Gloria Molina
Supervisor Mark Ridley-Thomas
Supervisor Zev Yaroslavsky
Supervisor Don Knabe

FROM: Wendy L. Watanabe
Auditor-Controller *Wendy Watanabe*

SUBJECT: **GUARDIANS OF LOVE FOSTER FAMILY AGENCY CONTRACT
REVIEW – A DEPARTMENT OF CHILDREN AND FAMILY SERVICES
PROVIDER**

We have completed a contract compliance review of Guardians of Love Foster Family Agency (Guardians or Agency), a Department of Children and Family Services (DCFS) provider. The purpose of our review was to determine whether Guardians was providing the services outlined in their Program Statement and the County contract. We completed our review during January and February 2009 and conducted a follow-up review in March 2010.

DCFS contracts with Guardians, a private non-profit community-based organization to recruit, train and certify foster parents for supervising children DCFS places in foster care. Once the Agency places a child, it is required to monitor the placement until the child is discharged from the program. Guardians manages 45 certified foster homes in which 89 DCFS children were placed at the time of our review. Guardians is located in the Second District. DCFS paid Guardians approximately \$2.0 million and \$2.5 million during Fiscal Years 2008-09 and 2009-10, respectively.

Results of Review

The foster children indicated that they enjoyed living with their foster parents and the foster parents indicated that the services they received from the Agency generally met their expectations. Guardians also ensured that social workers' caseloads did not exceed the maximum established by California Department of Social Services (CDSS)

Title 22 regulations. However, Guardians did not always ensure that the foster homes complied with the County contract and CDSS Title 22 regulations. For example:

- Two (50%) of the four homes reviewed in 2009 had safety bars on the windows in the children's bedrooms and the safety releases were inoperable, making it impossible to escape in case of an emergency. In addition, one of the two homes did not have an operable smoke detector in the hallway leading to the children's bedroom as required. This issue was also noted in our Guardians contract review report issued on February 28, 2007.

During our follow-up in 2010, we confirmed that the two homes had repaired the window safety bar releases and that the one home appropriately installed a smoke detector in the hallway. However, one of the homes had a patio door in the children's bedroom that was blocked making it impossible to escape in case of an emergency. In addition, another home had a smoke detector in the hallway to the children's bedroom that was barely audible when tested and had installed safety bars on the children's bedroom windows that did not have a safety release latch, making it impossible to escape in case of an emergency.

Guardians' attached response indicates that they will thoroughly evaluate the safety bars and smoke detectors during their inspections.

- One (50%) of the two children reviewed in 2009 that were taking psychotropic medications did not have a current court authorization for the medication and the case file did not have required documentation of monthly evaluations by their prescribing physician. However, the foster parent indicated that the child was taking the medication and was seen monthly by the prescribing physician. This issue was also noted in our report issued on February 28, 2007.

During our follow-up in 2010, the two additional case files that we reviewed of children that were taking psychotropic medications contained current court authorizations and documentation that the children were seen monthly by their prescribing physician.

Guardians' attached response indicates that they will ensure children taking psychotropic medications have a current court authorization and are seen monthly by the prescribing physician.

- Nine (64%) of the 14 case files reviewed in 2009 did not have documentation that the children were visited weekly by Guardians' social workers during the first three months of placement as required. During this period, 15 required visits were not documented for the nine children. This issue was also noted in our report issued on February 28, 2007.

During our follow-up in 2010, all additional case files we reviewed included documentation that the children were seen as required.

Guardians' attached response indicates that they are now ensuring that their social workers visit the children weekly.

- Eight (57%) of the 14 Needs and Services Plans (NSPs) reviewed in 2009 were not approved by the DCFS social workers as required. This issue was also noted in our report issued on February 28, 2007.

During our follow-up in 2010, all additional NSPs reviewed were approved by the DCFS social workers.

Guardians' attached response indicates that they will ensure social workers sign and approve the NSPs.

- Seven (50%) of the 14 NSPs reviewed in 2009 did not indicate the date they were sent to the DCFS social worker. As a result, the Agency did not document that they sent the NSPs to the DCFS social worker timely.

During our follow-up in 2010, all additional NSPs reviewed included the date that Guardians sent them to the DCFS social workers and were sent to the DCFS social worker timely.

Guardians' attached response indicates that they will document the date they send the NSPs to the social workers.

- One (13%) of Guardians' eight social workers did not have the required education and work experience qualifications during our 2009 review.

During our follow-up in 2010, all of Guardians' social workers had the required education and work experience qualifications including the one noted during our 2009 review.

Guardians' attached response indicates that they will ensure social workers possess the required education.

Details of our review, along with recommendations for corrective action, are attached.

Review of Report

We discussed our report with Guardians on November 2, 2009 and again on August 9, 2010 after we conducted our follow-up review. In their attached response (Attachment I), Guardians management indicates the actions the Agency has taken to implement the

recommendations. We also notified DCFS of the results of our initial and follow-up reviews. In their responses to both reviews (Attachment II), DCFS indicates they will monitor the Agency for compliance with our recommendations.

We thank Guardians management for their cooperation and assistance during our review. Please call me if you have any questions or your staff may contact Don Chadwick at (213) 253-0301.

WLW:JET:DC:AA

Attachments

c: William T Fujioka, Chief Executive Officer
Jackie Contreras, Ph.D, Interim Director, DCFS
Dr. Carlton Blanton, Board of Directors, Guardians of Love
Kinikki Fullerwood, Administrator, Guardians of Love
Jean Chen, Community Care Licensing
Public Information Office
Audit Committee

**FOSTER FAMILY AGENCY PROGRAM
GUARDIANS OF LOVE FOSTER FAMILY AGENCY
FISCAL YEARS 2008-09 AND 2009-10**

BACKGROUND

The Department of Children and Family Services (DCFS) pays Guardians of Love Foster Family Agency (Guardians or Agency) a negotiated monthly rate, per child placement, established by the California Department of Social Services' (CDSS) Foster Care Rates Bureau. Based on the child's age, Guardians receives between \$1,430 and \$1,679 per month, per child. DCFS paid Guardians approximately \$2.0 million and \$2.5 million during Fiscal Years (FY) 2008-09 and 2009-10, respectively.

PURPOSE/METHODOLOGY

The purpose of our review was to determine whether Guardians was providing the services outlined in their Program Statement and the County contract. We reviewed certified foster parent files, children's case files, personnel files and interviewed the Agency's staff. We also visited a number of certified foster homes and interviewed the children and the foster parents. We completed our review during January and February 2009 and conducted a follow-up review in March 2010.

BILLED SERVICES

Objective

Determine whether Guardians provided program services in accordance with their County contract and CDSS Title 22 regulations.

Verification

We visited four of the 45 Los Angeles County certified foster homes that Guardians billed DCFS and interviewed four foster parents and eight foster children placed in the four homes. In addition, we reviewed the case files for four foster parents and 14 children and we reviewed the Agency's monitoring activity. During March 2010, we revisited four homes and reviewed additional case files for three foster parents and seven children.

Results

Guardians did not always comply with the County contract requirements and CDSS Title 22 regulations. For example, Guardians did not always ensure that foster homes complied with CDSS Title 22 regulations, that children's Needs and Services Plans (NSPs) were appropriately completed, or that the parents' and children's case files contained complete information. Specifically, we noted the following:

Foster Home Visitation and Foster Parent Certification

- One (25%) of the four homes reviewed in 2009 had carpet in the children's room that was frayed, worn and in need of replacing. In addition, the light switch in the room needed a cover plate. Subsequent to our review, Guardians provided documentation that the carpet was replaced and a cover plate for the light switch was installed.

During our follow-up in 2010, we confirmed that the carpet had been replaced and a light cover plate was installed.

- Two (50%) of the four homes reviewed in 2009 had safety bars on the windows in the children's bedrooms and the safety releases were inoperable, making it impossible to escape in case of an emergency. In addition, one of the two homes did not have an operable smoke detector in the hallway leading to the children's bedroom as required. This issue was also noted in our Guardians contract review report issued on February 28, 2007.

During our follow-up in 2010, we confirmed that the two homes had repaired the window safety bar releases and that the one home appropriately installed a smoke detector in the hallway. However, one of the homes had a patio door in the children's bedroom that was blocked making it impossible to escape in case of an emergency. In addition, another home had a smoke detector in the hallway to the children's bedroom that was barely audible when tested and had installed safety bars on the children's bedroom windows that did not have a safety release latch, making it impossible to escape in case of an emergency.

- One (25%) of the four homes reviewed in 2009 did not have a readily available disaster plan and a second home did not have a readily available list of emergency contacts as required.

During our follow-up in 2010, we confirmed that the one home appropriately developed a disaster plan and the second home developed a list of emergency contacts.

- One (25%) of the four foster parent files reviewed in 2009 did not have documentation of a pre-certification health screening and tuberculosis test as required.

During our follow-up in 2010, we confirmed that Guardians included health screening and tuberculosis test documentation in the one foster parent's file. The three additional foster parent files that we reviewed also had the required health screening and tuberculosis test documentation.

Children's Case Files

- Seven (50%) of the 14 case files reviewed in 2009 did not have documentation that the children or their DCFS social workers were informed of the children's personal rights and the Agency's policies and procedures as required. This issue was also noted in our report issued on February 28, 2007.

During our follow-up in 2010, all additional case files that we reviewed included documentation that the DCFS social workers and the children were informed of the children's personal rights.

- Nine (64%) of the 14 case files reviewed in 2009 did not have documentation that the children were visited weekly by Guardians' social workers during the first three months of placement as required. During this period, 15 required visits were not documented for the nine children. This issue was also noted in our report issued on February 28, 2007.

During our follow-up in 2010, all additional case files we reviewed included documentation that the children were seen as required.

- Two (14%) of the 14 case files reviewed in 2009 did not have a Special Incident Report (SIR) although the files contained documentation of specific incidents that required the Agency to prepare the reports. Subsequent to our review, the Agency provided documentation that they submitted SIRs to DCFS. This issue was also noted in our report issued on February 28, 2007.

During our follow-up in 2010, the two additional case files that we reviewed contained documentation that indicated the Agency appropriately prepared SIRs.

Medical Services

- Two (14%) of the 14 children reviewed in 2009 received initial dental examinations 84 and 65 days late, respectively. This issue was also noted in our report issued on February 28, 2007.

During our follow-up in 2010, the additional case files that we reviewed contained documentation that the children received initial dental examinations timely.

- Two of Guardians' children were taking psychotropic medications during our 2009 review. However, one (50%) of the two children did not have a current court authorization for the medication and the case file did not have required documentation of monthly evaluations by their prescribing physician. However, the foster parent indicated that the child was taking the medication and was seen monthly by the prescribing physician. This issue was also noted in our report issued on February 28, 2007.

During our follow-up in 2010, the additional case files for all of the children that were taking psychotropic medications contained current court authorizations and documentation that the children were seen monthly by their prescribing physician.

Needs and Services Plans

- Eight (57%) of the 14 NSPs reviewed in 2009 were not approved by the DCFS social workers as required. This issue was also noted in our prior review for the case files that we reviewed.

During our follow-up in 2010, all additional NSPs reviewed were approved by the DCFS social workers.

- Two (14%) of the 14 NSPs reviewed in 2009 were 52 and 21 days past due, respectively.

During our follow-up in 2010, all additional NSPs reviewed were prepared timely.

- Seven (50%) of the 14 NSPs reviewed in 2009 did not indicate the date they were sent to the DCFS social worker. As a result, the Agency did not document that they sent the NSPs to the DCFS social worker timely.

During our follow-up in 2010, all additional NSPs reviewed included the date that Guardians sent them to the DCFS social workers and were sent to the DCFS social worker timely.

- Four (29%) of the 14 NSPs reviewed in 2009 did not indicate that the children or the foster parents were offered the opportunity to participate in developing the NSPs.

During our follow-up in 2010, all additional NSPs reviewed indicated that the children or the foster parents were offered the opportunity to participate in developing the NSPs.

Quarterly Reports and Termination Reports

- Three (21%) of the 14 Quarterly Reports reviewed in 2009 were completed 48 days late.

During our follow-up in 2010, all additional Quarterly Reports reviewed were prepared timely.

- Five (36%) of the 14 Quarterly Reports reviewed in 2009 did not indicate the date they were sent to the DCFS social workers. As a result, the Agency did not document that the reports were sent to the DCFS social worker timely.

During our follow-up in 2010, all additional Quarterly Reports reviewed were sent to the DCFS social worker timely.

- Ten (36%) of the 28 Termination Reports reviewed in 2009 did not include a closing summary of the Agency's placement records as required. This issue was noted in our report issued on February 28, 2007.

During our follow-up in 2010, one (9%) of the additional 11 Termination Reports reviewed did not include a closing summary.

Recommendations

Guardians management ensure:

1. **Staff adequately monitor foster homes to ensure they comply with the County contract and CDSS Title 22 regulations.**
2. **Foster homes are well-maintained in accordance with the County contract and CDSS Title 22 regulations.**
3. **Safety releases on window safety bars are operable and foster homes have operable smoke detectors in the hallways leading to the children's bedrooms.**
4. **Foster homes have a written disaster plan and a posted list of emergency contacts.**
5. **Foster parent certification files contain all the required information including documentation of a pre-certification health screening and tuberculosis test.**
6. **Children and the DCFS social workers are informed of the Agency's policies and procedures.**
7. **Children are visited weekly by Guardians' social workers during the first three months of placement.**
8. **Special Incident Reports are prepared when required.**
9. **Children's initial dental examinations are conducted within the required timeframes.**
10. **Children taking psychotropic medication have a current court authorization for the administration of the medication and are seen monthly by the prescribing physician.**

11. NSPs are approved by the DCFS social workers.
12. NSPs are prepared timely and contain the date they were sent to the DCFS social workers.
13. Children and foster parents are offered the opportunity to participate in the development of the NSPs.
14. Quarterly Reports are prepared timely and contain the date they were sent to the DCFS social workers.
15. Termination Reports include a closing summary of the Agency's records related to the child's placement.

CLIENT VERIFICATION

Objective

Determine whether the program participants received the services that Guardians billed to DCFS.

Verification

We interviewed eight children placed in four Guardians certified foster homes and four foster parents to confirm the services Guardians billed to DCFS.

Results

The foster children indicated that they enjoyed living with their foster parents and the foster parents indicated that the services they received from the Agency generally met their expectations.

Recommendation

None.

STAFFING/CASELOAD LEVELS

Objective

Verify that Guardians social workers' caseloads do not exceed 15 placements and that the supervising social worker does not supervise more than six social workers as required by the County contract and CDSS Title 22 regulations.

Verification

We interviewed Guardians' administrator and reviewed caseload statistics and payroll records for the Agency's social workers and supervising social workers.

Results

Guardians' eight social workers carried an average caseload of 12 cases and the Agency's two supervising social workers supervised an average of four social workers.

Recommendation

None.

STAFFING QUALIFICATIONS**Objective**

Determine whether Guardians' staff possess the education and work experience qualifications required by their County contract and CDSS Title 22 regulations. In addition, determine whether the Agency conducted hiring clearances prior to hiring their staff and provided ongoing training to staff.

Verification

We interviewed Guardians' administrator and reviewed each staff's personnel file for documentation to confirm their education and work experience qualifications, hiring clearances and ongoing training.

Results

Guardians' administrator and supervising social workers possessed the education and work experience required by the County contract and CDSS Title 22 regulations. In addition, Guardians conducted the required hiring clearances and provided ongoing training for staff working on the County contract. However, one (13%) of the eight Agency social workers did not possess the required education and work experience qualifications during our 2009 review. Subsequent to our review, the Agency provided documentation of an exception from CDSS' Community Care Licensing for this employee.

During our follow-up in 2010, all of Guardians' social workers had the required education and work experience qualifications.

Recommendation

- 16. Guardians management ensure that staff working on the County contract possess the education required by CDSS Title 22 regulations.**

PRIOR YEAR FOLLOW-UP

Objective

Determine the status of the recommendations reported in the prior Auditor-Controller monitoring review.

Verification

We verified whether the outstanding recommendations from the FY 2005-06 monitoring review were implemented. The report was issued on February 28, 2007.

Results

The February 28, 2007 monitoring report had 15 recommendations. As indicated above, the findings related to eight recommendations in this report were also noted in the February 28, 2007 monitoring report.

During our follow-up in 2010, Guardians had fully implemented 12 recommendations from our February 28, 2007 report. Of the remaining three recommendations, one was partially implemented and two were not implemented.

Recommendation

- 17. Guardians management fully implement the outstanding recommendations from the February 28, 2007 monitoring report.**

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CORRECTIVE ACTION PLAN

September 07, 2010

To: Supervisor Don Knabe, Chair
Supervisor Gloria Molina
Supervisor Mark Ridley-Thomas
Supervisor Zev Yaroslavsky
Supervisor Michael D. Antonovich

From: Kinikki Fullerwood, FFA Administrator
Rev. Ralph E. Butler, CEO

RE: GUARDIANS OF LOVE, FFA CORRECTIVE ACTION PLAN

Guardians of Love, FFA (GOLFFA) has been providing foster care services since 1997. It is and has always been our desire to provide comprehensive services to all the children that enter our doors. It is our desire to continue to provide these services to children while adhering to all the contractual requirements specified in our Department of Children and Family Services contract and CDSS Title 22 regulations.

The following is a response to the program audit and the follow-up compliance review (March 2010) conducted by the County of Los Angeles Department of Auditor-Controller. Please note that during the initial reporting period GOLFFA had another administrator employed who was terminated for unfulfilled obligations including not complying or fully implementing previous Corrective Action Plans. A new administrator was employed a year ago and has since then revamped several of the forms and procedures that were currently used to be more inclusive, accurate and provide a check and balance.

During the follow up review conducted in March 2010, GOLFFA had fully implemented fourteen of the seventeen recommendations and had partially implemented one of the seventeen recommendations. The corrective actions that are detailed below were implemented prior to the submission of this corrective action plan. The original Corrective Action Plan is found on pages one – four. The revised CAP is found on pages four & five.

RECOMMENDATIONS AND RESPONSES

RECOMMENDATION I - STAFF ADEQUATELY MONITOR FOSTER HOMES TO ENSURE THEY COMPLY WITH THE COUNTY CONTRACT AND CDSS TITLE 22 REGULATIONS.

Guardians of Love, FFA ensures that all certified homes will be visited in accordance with the guidelines stipulated in our program statement. The program statement states that we will visit the children a maximum of four times monthly. Foster Care Social Worker's (FCSW) are closely

monitored to ensure that they are completing their weekly visits and are required to submit written verification in the form of Case Activity Visit Logs (CAV).

RECOMMENDATION II - FOSTER HOMES ARE WELL-MAINTAINED IN ACCORDANCE WITH THE COUNTY CONTRACT AND CDSS TITLE 22 REGULATIONS.

Guardians of Love, FFA will comply with the Statement of Work and Title 22 regulations and ensure that a home inspection of each certified home is conducted at least every six months. GOLFFA will diligently work with the certified parent to ensure that any deficiencies found during the inspection will be resolved in a timely manner.

RECOMMENDATION III - SAFETY RELEASES ON WINDOW SAFETY BARS ARE OPERABLE AND FOSTER HOMES HAVE OPERABLE SMOKE DETECTORS IN THE HALLWAYS LEADING TO THE CHILDREN'S BEDROOMS

Guardians of Love, FFA will thoroughly evaluate every certified home while conducting certified home inspections. All smoke detectors and safety bars will be tested at the time of inspection.

Please note, that in this particular case, a home inspection was done two weeks prior and there were no notations of any safety bar or alarm issues. Because of this malfunction, GOLFFA instructed the certified parent to test their fire alarm and safety bars on a weekly basis for at least two months. If at anytime during any of those tests the safety bars or the fire alarm malfunctions, the certified parent was instructed to get a professional to come out to troubleshoot and resolve and malfunctions.

RECOMMENDATION IV - FOSTER HOMES HAVE A WRITTEN DISASTER PLAN AND A POSTED LIST OF EMERGENCY CONTACTS.

All GOLFFA FCSW's have been retrained on conducting the certified home inspection. Every social worker has been informed that the disaster plan and emergency numbers must be posted and not just filed in the certified home file. If there is no disaster plan or emergency contacts posted GOLFFA has instructed all FCSW's to notate this in the needs section of the home inspection and follow up to ensure that the items have been properly posted.

RECOMMENDATION V - FOSTER PARENT CERTIFICATION FILES CONTAIN ALL THE REQUIRED INFORMATION INCLUDING DOCUMENTATION OF PRE-CERTIFICATION HEALTH SCREENING AND TUBERCULOSIS TEST.

Prior to certification, GOLFFA will ensure that all pre-certification information is collected and that a health screening / tuberculosis test is performed no more than a year prior to certification. In the event that a prospective parent has been in the process of certification for more than a year, GOLFFA will ensure that the prospective parent submit a new health screening/ tuberculosis test prior to certification.

RECOMMENDATION VI - CHILDREN AND THE DCFS SOCIAL WORKERS ARE INFORMED OF THE AGENCY'S POLICIES AND PROCEDURES.

At the time of placement, provided the CSW is present, Guardians of Love, FFA will have CSW sign our Grievance Procedure Form which details GOLFFA's policies and procedures. If the CSW is not present at the time of placement, GOLFFA will fax the procedures to the CSW and will document fax verification by filing the fax confirmation in the minor's placement file.

RECOMMENDATION VII - CHILDREN ARE VISITED WEEKLY DURING THE FIRST THREE MONTHS OF PLACEMENT.

Guardians of Love, FFA ensures that all certified homes will be visited in accordance with the guidelines stipulated in our program statement. The program statement states that we will visit the children a maximum of four times monthly. FCSW's are closely monitored to ensure that they are

completing their weekly visits and are required to submit written verification in the form of Case Activity Visit Logs (CAV).

RECOMMENDATION VIII - SPECIAL INCIDENTS ARE PREPARED WHEN REQUIRED.

Guardians of Love, FFA FCSW's have been retrained on reportable incidents and the time frames in which a special incident report should be completed and sent to the required entities. GOLFFA will ensure that all special incident reports are submitted within the guidelines of DCFS and Title 22 regulations.

RECOMMENDATION IX - CHILDREN'S INITIAL DENTAL EXAMINATIONS ARE CONDUCTED WITHIN THE REQUIRED TIMEFRAMES.

Guardians of Love, FFA requires that all foster children receive age appropriate medical and dental exams. GOLFFA utilizes the California Child Health and Disability Prevention Program (CHDP) as a guideline.

To ensure that all medical and dental exams are performed within the required time period GOLFFA's Supervising Foster Care Social Worker (SFCSSW) will review all files on a monthly basis to ensure that all medical and dental exams are received within the appropriate time frame. In accordance with CDSS Title 22 Regulation 80069, if the medical assessment cannot be completed within 30 days, a medical appointment date shall be obtained by the foster family agency within 30 days of placement of the child and notated in the minor's initial Needs and Services Plan. In the event that a medical appointment date cannot be set due to Medi-cal issues a detailed progress note will be placed in the minor's placement file.

RECOMMENDATION X - CHILDREN TAKING PSYCHOTROPIC MEDICATION HAVE A CURRENT COURT AUTHORIZATION FOR THE ADMINISTRATION OF THE MEDICATION ARE SEEN MONTHLY BY THE PRESCRIBING PHYSICIAN.

Guardians of Love, FFA will do everything within our confines to ensure that children taking psychotropic medication have a current court authorization for the administration of the medication and are seen monthly by the prescribing physician. In the event that a minor is placed in our agency and is already taking psychotropic medication, Guardians of Love, FFA will work diligently to secure the court authorization from the Department of Children and Family Services.

RECOMMENDATION XI - NSP'S ARE APPROVED BY THE DCFS SOCIAL WORKERS.

In compliance with our DCFS contract, GOLFFA will submit all Needs and Services Plans to the CSW no later than the 10th business day following the end of each quarter. GOLFFA will retain proof of submission in the minor's placement file. Guardians of Love, FFA will make at least two CSW's attempts and one supervisor attempt in an effort to ensure that we have signed and approved Needs and Services Plans for all of our placements.

RECOMMENDATION XII - NSPS ARE PREPARED TIMELY AND CONTAIN THE DATE THEY WERE SENT TO THE DCFS SOCIAL WORKERS.

GOLFFA will submit all Needs and Services Plans to the CSW no later than the 10th business day following the end of the quarter and will include the date that it was signed and completed. GOLFFA will retain proof of submission in the minor's placement file which will include the date that it was sent to the CSW.

RECOMMENDATION XIII - CHILDREN AND FOSTER PARENTS ARE OFFERED THE OPPORTUNITY TO PARTICIPATE IN THE DEVELOPMENT OF THE NSPS.

In Accordance with Title 22, Regulation 88068.3(b) GOLFFA shall ensure that the child, age permitting, and his/her authorized representative(s); the certified parent(s) are offered the opportunity to participate in the development and modifications of the minor's Needs and Services Plan.

RECOMMENDATION XIV - QUARTERLY REPORTS ARE PREPARED TIMELY AND CONTAIN THE DATE THEY WERE SENT TO THE DCFS SOCIAL WORKERS.

GOLFFA will submit all Quarterly Reports to the CSW no later than the 10th business day following the end of the quarter and will include the date that it was signed and completed. GOLFFA will retain proof of submission in the minor's placement file which will include the date that it was sent to the CSW.

RECOMMENDATION XV - TERMINATION REPORTS INCLUDE A CLOSING SUMMARY OF THE AGENCY'S RECORDS RELATED TO THE CHILD'S PLACEMENT.

Guardians of Love, FFA revised their existing Replacement/Termination Report to include more sections to ensure that the FCSW is including all pertinent information. Additionally, every termination report needs to be reviewed and approved by the Supervising Foster Care Social Worker prior to it being filed in the minor's placement file.

Additional training was provided to all FCSW's on the proper procedure for completing the replacement/termination form.

RECOMMENDATION XVI – GUARDIANS MANAGEMENT ENSURE THAT THE STAFF WORKING ON THE COUNTY CONTRACT POSSESS THE EDUCATION REQUIRED BY THE CDSS TITLE 22 REGULATIONS.

Guardians of Love, FFA will ensure that all Foster Care Social Workers employed possess the required education for social work personnel in accordance with CDSS Title 22 Regulation 88065.3.

RECOMMENDATION XVII – GUARDIANS' MANAGEMENT IMPLEMENT THE OUTSTANDING RECOMMENDATIONS FROM THE FISCAL YEAR 2005-2006 MONITORING REPORT.

Please see our response to recommendations 1, 3, 7,8,9,10,11 and 15 in this report for our Corrective Action Plan for outstanding recommendations from the 2005-2006 monitoring report.

- UPDATED CORRECTIVE ACTION PLAN -

MODIFIED SEPTEMBER 7, 2010

The following is an updated Corrective Action Plan (CAP) based on the follow-up compliance review conducted by the County of Los Angeles Department of Auditor-Controller during March 2010. The corrective actions detailed below were implemented prior to the submission of this CAP.

RECOMMENDATIONS AND RESPONSES

RECOMMENDATION III - SAFETY RELEASES ON WINDOW SAFETY BARS ARE OPERABLE AND FOSTER HOMES HAVE OPERABLE SMOKE DETECTORS IN THE HALLWAYS LEADING TO THE CHILDREN'S BEDROOMS

Guardians of Love, FFA will thoroughly evaluate every certified home while conducting certified home inspections. All smoke detectors and safety bars will be tested at the time of inspection. GOLFFA has also instructed all certified parents to notify the agency prior to making any changes to the physical interior/exterior of their certified home that may potentially violate Health and Safety regulations.



PATRICIA S. PLOEHN, LCSW
Director

County of Los Angeles
DEPARTMENT OF CHILDREN AND FAMILY SERVICES

425 Shatto Place, Los Angeles, California 90020
(213) 351-5602

February 4, 2010

TO: Aggie Alonso, Chief Accountant-Auditor
Countywide Contract Monitoring Division

FROM: Elizabeth A. Howard, Section Head *EAH*
Out of Home Care Management Division *DOCR*
Foster Family Agency/Group Home Performance Management

Board of Supervisors
GLORIA MOLINA
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**DCFS RESPONSE TO THE AUDITOR CONTROLLER'S CONTRACT REVIEW OF
GUARDIANS OF LOVE FOSTER FAMILY AGENCY**

The Auditor Controller's Contract Review of Guardians of Love Foster Family Agency was conducted in January/February 2009. The Out of Home Care Management Division (OHCMD) received the Auditor-Controller's January 7, 2010 final draft report of the contract compliance review on January 7, 2010. The DCFS monitor reviewed the report on January 12, 2010.

The report noted that DCFS was billed for an unused bed for a child who was detained at juvenile hall during his placement with Guardians of Love. This brought to OHCMD's attention on February 3, 2009 and OHCMD immediately telephonically contacted the DCFS case-carrying CSW and the Agency for further query. OHCMD learned that the child was placed with the Agency on an approved Special Placements DCFS 4213 for his special needs and the DCFS case-carrying CSW approved a bed-hold beyond seven days for the child because this placement was the "most appropriate placement." On February 5, 2009, OHCMD contacted the Regional management team (CSW, SCSW and ARA) and reinforced the policy/contract requirement on bed holds. OHCMD also requested a Corrective Action Plan (CAP) from the Agency in which the Agency Administrator states that he will "never hold a bed open for a period longer than the period allowed per our contract no matter what the circumstance."

Other findings noted in the A-C's final draft report indicated that a few homes were not in compliance with the County contract and California Department of Social Services (CDSS) Title 22 regulations, pertaining to physical plant deficiencies. None of the physical plant deficiencies reported posed a safety hazard to placed children. Several reviewed files were missing required documentation including but not limited to, updated court authorizations and monthly evaluations by physicians for one child taking

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**DCFS RESPONSE TO THE AUDITOR CONTROLLER'S CONTRACT REVIEW OF
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psychotropic medications. This was a documentation finding only and the report indicated that the child was taking medication as prescribed and was seeing a physician monthly. Finally, several Needs and Services Plans/Quarterly Reports and termination reports were found deficient. In an effort to ensure providers improve in these areas, OHCMD has provided all contracted Foster Family Agencies with the current psychotropic medication policies and protocols. Additionally, a re-fresher training on Needs and Services Plans/Quarterly Reports was conducted on January 12, 2010.

The Auditor Controller approved Guardians of Love FFA's CAP dated November 17, 2009 which includes the change of administrator, the implementation of the A-C recommendations including physical plant deficiencies and the agency's plan for the utilization of revised forms and procedures, additional staff training and closer supervision to ensure ongoing compliance with the contractual requirements.

The Out of Home Care Management Division (OHCMD) will conduct a follow-up review based on the A-C's recommendations within six months after the issuance of the A-C's final report.

If you have any questions, please contact me at (626) 569-6804.

MG:EAH:CR:EK

c: Brian Mahan, CEO, Children & Families Well-Being Cluster
Wendy L. Watanabe, Auditor-Controller
Patricia Ploehn, Director, DCFS
Lisa Parrish, Deputy Director, DCFS



PATRICIA S. PLOEHN, LCSW
Director

County of Los Angeles
DEPARTMENT OF CHILDREN AND FAMILY SERVICES

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November 19, 2010

TO: Aggie Alonso, Chief Accountant-Auditor
Countywide Contract Monitoring Division

FROM: Elizabeth A. Howard, Section Head
Out of Home Care Management Division
Foster Family Agency/Group Home Performance Management

Board of Supervisors
GLORIA MOLINA
First District
MARK RIDLEY-THOMAS
Second District
ZEV YAROSLAVSKY
Third District
DON KNABE
Fourth District
MICHAEL D. ANTONOVICH
Fifth District

**DCFS RESPONSE TO THE AUDITOR CONTROLLER'S CONTRACT REVIEW OF
GUARDIANS OF LOVE FOSTER FAMILY AGENCY**

The Auditor Controller's Contract Review of Guardians of Love Foster Family Agency was conducted in January/February 2009. The Out of Home Care Management Division (OHCMD) received the Auditor-Controller's initial final draft report of the contract compliance review on January 7, 2010. The DCFS monitor reviewed the report on January 12, 2010, and provided the response letter to the Auditor-Controller (A-C) on February 4, 2010.

The A-C's January 7, 2010 draft report noted that DCFS was billed for an unused bed for a child who was detained at juvenile hall during his placement with Guardians of Love. This was brought to OHCMD's attention during the A-C's review and on February 3, 2009. OHCMD immediately telephonically contacted the DCFS case-carrying CSW and the Agency for further query. OHCMD learned that the child was placed with the Agency on an approved Special Placements DCFS 4213 for his special needs and the DCFS case-carrying CSW approved a bed-hold beyond seven days for the child because this placement was the "most appropriate placement." On February 5, 2009, OHCMD contacted the Regional management team (CSW, SCSW and ARA) and reinforced the policy-contract requirement on bed holds. OHCMD also requested a Corrective Action Plan (CAP) from the Agency in which the Agency Administrator stated that he will "never hold a bed open for a period longer than the period allowed per our contract no matter what the circumstance."

Other findings noted in the A-C's January 7, 2010 draft report indicated that a few homes were not in compliance with the County contract and California Department of Social Services (CDSS) Title 22 regulations, pertaining to physical plant deficiencies. None of the physical plant deficiencies reported posed a safety hazard to placed children. Several reviewed files were missing required documentation including but not

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**DCFS RESPONSE TO THE AUDITOR CONTROLLER'S CONTRACT REVIEW OF
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PAGE 2**

limited to, updated court authorizations and monthly evaluations by physicians for one child taking psychotropic medications. This was a documentation finding only and the report indicated that the child was taking medication as prescribed and was seeing a physician monthly. Finally, several Needs and Services Plans/Quarterly Reports and termination reports were found deficient. In an effort to ensure providers improve in these areas, OHCMD has provided all contracted Foster Family Agencies with the current psychotropic medication policies and protocols. Additionally, a re-fresher training on Needs and Services Plans/Quarterly Reports was conducted on January 12, 2010.

The Auditor Controller approved Guardians of Love FFA's initial Corrective Action Plan dated November 17, 2009 which includes the change of administrator, the implementation of the A-C recommendations including physical plant deficiencies and the agency's plan for the utilization of revised forms and procedures, additional staff training and closer supervision to ensure ongoing compliance with the contractual requirements.

On October 28, 2010, the A-C informed OHCMD that they conducted a follow up review in March, 2010, and provided DCFS with an updated draft report dated October 28, 2010 along with the approved updated CAP from the Guardians of Love FFA dated September 7, 2010. The A-C's March, 2010 follow up review found no egregious findings which rose to the level of a referral to the Child Protection Hotline. Further, the follow up review reflects that the A-C verified the implementation of their recommendations in most of the areas of concerns. The remaining findings are that one certified home had a barely audible smoke detector in the hallway and two certified homes had an inadequate disaster plan. Additionally, one Termination Report did not include a closing summary.

The Out of Home Care Management Division (OHCMD) will conduct a follow-up review to monitor the Agency's full compliance in the three outstanding A-C's recommendations within six months after the issuance of the A-C's final report.

If you have any questions, please contact me at (626) 569-6804.

KR:EAH:ek

c: Brian Mahan, CEO, Children & Families Well-Being Cluster
Wendy L. Watanabe, Auditor-Controller
Patricia Ploehn, Director, DCFS
Lisa Parrish, Deputy Director, DCFS